



## THE FELL PONY SOCIETY

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A Company Limited by Guarantee. Company Number 3233346. Registered Charity No 1104945

### MEMBERSHIP FORM

| Types of membership<br>( & privileges)  | Fees from January 2021 |               | Privileges                               |
|---|------------------------|---------------|--|
|   | <i>UK</i>              | <i>O/Seas</i> |  |
| Full (1,2,3,4,5,6)  | £30                    | £40           | 1 Vote at meetings & for Council         |
| Associate (5,6)   | £20                    | £30           | 2 Benefit from preferential fees/charges |
| Junior (under 18 years<br>at 1 January: 2,3,4,5,6)                                    | £20                    | £30           | 3 Exhibit ponies at FPS Shows            |
| Family (Couple & children<br>at same address: adults 1,2,3,4,5,6, children 2,3,4,5,6) | £60                    | £80           | 4 Compete for special rosettes           |
|   |                        |               | 5 Receive all magazines/newsletters      |
|   |                        |               | 6 Access to online FPS Stud Book         |

\* Please enrol me as a.....(*indicate type of membership*) member of the Fell Pony Society. I agree to be bound by the rules of the Society as set out in the Memorandum and Articles of Association and I understand that my liability as a member of the Company is limited to a maximum of £1.

Please note that membership runs from 1 January to 31 December; irrespective of when paid, membership is due for renewal annually on 1 January.

**All personal data will be processed by the Fell Pony Society in accordance with the General Data Protection Regulations 2018. The data will be used for administrative purposes so that the Society can manage its operations effectively. Data may be released to DEFRA and other enforcement bodies to meet the requirements of equine passport legislation and regulations. You will be given the opportunity to decide on the type of data that can be accessed by other members as the data entered into the database is accessible through the Society's website. Your signature indicates your consent to the Society processing your personal data in accordance with the principles of the General Data Protection Regulations 2018.**

Please complete clearly in BLOCK CAPITALS:

\* Title: (Mr/Mrs/Ms/Miss)..... \* Forename & Last Name .....

\* Address: .....

.....

\* Telephone Number ..... E-mail.....

Date of Birth (if under 18).....nb. A parent/guardian must sign on behalf of members who are under 18.

\* I confirm that I am 18 years or over and have read the information about Data Protection and agree to my personal data being used in the way described above or as parent/guardian I have read the information about Data protection and agree to the applicant's personal data being used in the way described above.

\* Signature..... \* Date.....

For Family membership, please give full name of second adult.....

Signature of second adult..... Date.....

and full name/s of child/ren (including Date/s of Birth).....

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